

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE  |
|---------------------------|----------|--------|-------|
| SEE DETERMINATION         |          |        |       |
| OFFICE CLASSIFIER         |          | 48     | 12/1  |
| FORMALITY REVIEW          | SVB      | 64783  | 02/20 |
| RESPONSE FORMALITY REVIEW |          |        |       |

# INDEX OF CLAIMS

**BEST AVAILABLE COPY**

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     | ✓     | 4/3/07   |      |
| 2     | ✓     | 8/24/04  |      |
| 3     | ✓     | 2/3/03   |      |
| 4     | ✓     | 10/2/03  |      |
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| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 51    | ✓     | 4/3/07   |      |
| 52    | ✓     | 8/24/04  |      |
| 53    | ✓     | 2/3/03   |      |
| 54    | ✓     | 10/2/03  |      |
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| 63    | ✓     |          |      |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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